

**U.S. FISH AND WILDLIFE SERVICE
SUPERVISOR - EMPLOYEE ORIENTATION CHECKLIST**

The following checklist is designed to ensure that your Flexiplace employee is properly oriented to the policies and procedures of the Program. Questions 4, 5, and 6 may not be applicable to your Flexiplace employee. If this is the case, simply state nonapplicable or n/a.

Name/Telephone # of Flexiplace Employee _____

Name/Telephone # of Immediate Supervisor _____

- | | | |
|----|---|----------------|
| 1. | Employee has read 226 FW 3, Flexible Workplace, that outlines policies and procedures of the Program. | Date Completed |
| | | _____ |
| 2. | Employee has been provided a schedule of core hours. | _____ |
| 3. | Employee has been issued/has not been issued equipment. | _____ |
| 4. | Equipment issued by the agency is documented. | _____ |

<u>Check as applicable:</u>	Yes	No
Computer	_____	_____
Modem	_____	_____
Fax machine	_____	_____
Telephone	_____	_____
Desk	_____	_____
Chair	_____	_____
Other _____	_____	_____

- | | | |
|----|--|-------|
| 5. | Policies and procedures for care of equipment issued by the Service have been explained and are clearly understood. | _____ |
| 6. | Polices and procedures covering secure or privacy act data have been discussed and are clearly understood. | _____ |
| 7. | Requirements for an adequate and safe office space and/or area have been discussed, and the employee certifies those requirements are met. | _____ |
| 8. | Performance expectations have been discussed and are clearly understood. | _____ |
| 9. | Employee understands that the supervisor may terminate employee's participation at any time, in accordance with established administrative procedures and union negotiated agreements. | _____ |

Supervisor's Signature/Date
3-2170 (03/95)

Employee's Signature/Date